			_										
PATENT APPLICATION FEE DETERMINATION RECO							ORE	oplication or Docket Number					
Effective October 1, 2000									09828710				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			34					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBÉR-EXTRA		1	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			} <> minus 20=		. 14		1	X\$ 9=		OR	X\$18=	252	
INDEPENDENT CLAIMS			# minus 3 =		. 4			X40=		OR	X80=	37/	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT			+135				OR	+270=	-	
• if	the difference	in column 1 is:	ero, enter "0" in column 2			٠.	TOTAL		OR	TOTAL	1282		
CLAIMS AS AMENDED - PART II									L	10.1	OTHER		
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.34	Minus	-30	1	= /		X\$ 9=	/	OR	X\$18=	/	
	independent	. 4	Minus		{	/	]	X40=		OR	X80=	/	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						]		<del>/</del>	On.	<i>A</i>	_	
								+135=	(	OR	+2704		
						•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	<u> </u>	
		(Column 1) CLAIMS	· .	(Colu		(Column 3	3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		-		X\$ 9=		OR	X\$18=		
	Independent	·	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				CLAIM		إ	+135=			+270=		
							1	TOTAL		OR	TOTAL		
•								ADDIT. FEE	· ·	ОЯ	ADDIT. FEE	<u> </u>	
_		(Column 1) CLAIMS		(Colu	mn 2)	(Column 3	3)						
NDMENT C		REMAINING AFTER AMENDMENT		NUM	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	,	
AMEN	Independent	•	Minus	***		-	]	X40=			X80=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			7	-	OR		<del> </del>	
• 1	II the entry in order	mn 1 is lass than t	na antos la sede		n 90° to acc	hmm 9 .		+135=		OR	+270=		
••	If the "Highest Nu	mn 1 is less then t mber Previously Pi mber Previously P	eld For IN THI	S SPACE	la less tha	n 20, enter 7		YOYAL Addit, Fee		OR	TOTAL ADDIT: FEE		
		nber Previously Pa						und in the app	od statrqoru	k iu co	lumn 1.		

FORM PTD-875 (Rev. 8/00)

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